STATE OF ALABAMA MANUFACTURED HOUSING COMMISSION

350 SOUTH DECATUR STREET MONTGOMERY, ALABAMA 36104 (334) 242-4036 FAX (334) 240-3178

APPLICATION TO TRANSFER SALESPERSON'S LICENSE

SALESPERSON'S NAME	(First)		(MI)	(Last)
			,	DL NO
				_
TRANSFER FROM:				
RETAIL CENTER				
RETAIL CENTER LICENSE N	IUMBER			
LOCATION ADDRESS				
CITY			STATE	ZIP
PHONE ()	FAX ()		COUNTY
	<u>TR</u> /	ANSF	ER TO:	
NEW RETAIL CENTER				
NEW RETAIL CENTER LICH	SE NUMBER			
LOCATION ADDRESS				
CITY			STATE	ZIP
PHONE ()	FAX ()		COUNTY
	d a check or mone	y orde	er made payab	ousing Commission Chapter 535-X-14, I ble to the Alabama Manufactured Housing Commission's laws, rules, and
SIGNATURE			DAT	TE

(PLEASE PRINT OR WRITE LEGIBLY)